

PLEASE NOTE: Legislative Information **cannot** perform research, provide legal advice, or interpret Maine law. For legal assistance, please contact a qualified attorney.

An Act Regarding Insurance Copayments for Short-term Prescriptions

Be it enacted by the People of the State of Maine as follows:

Sec. 1. 24-A MRS §2765 is enacted to read:

§ 2765. Copayments for short-term prescriptions

An insurer that issues individual health insurance policies and contracts that provide coverage for prescription drugs shall adjust the copayment of an insured person to accommodate a short-term prescription for 14 days or less when short-term prescribing for that person is determined to be appropriate by the licensed health care professional who writes the prescription. The copayment must be proportional to the copayment for a longer time period. The requirements of this section apply to the insurer and to a 3rd-party administrator or pharmaceutical benefits manager under contract with the insurer. The superintendent shall adopt rules to implement this section. The rules must include a penalty provision applicable to an insurer that fails to provide coverage as required by this section and the rules adopted pursuant to this section. The penalty provision must require an insurer that does not comply with the requirements of this section and the rules adopted pursuant to this section to pay a contribution to the Unused Pharmaceutical Disposal Program Fund established under Title 22, section 2700, subsection 5. Rules adopted under this section are routine technical rules as defined by Title 5, chapter 375, subchapter 2-A. As part of the rule-making process, notice must be given to the joint standing committee of the Legislature having jurisdiction over insurance and financial services matters and the joint standing committee of the Legislature having jurisdiction over health and human services matters.

Sec. 2. 24-A MRS §2847-Q is enacted to read:

§ 2847-Q. Copayments for short-term prescriptions

An insurer that issues group health insurance policies and contracts that provide coverage for prescription drugs shall adjust the copayment of an insured person to accommodate a short-term prescription for 14 days or less when short-term prescribing for that person is determined to be appropriate by the licensed health care professional who writes the prescription. The copayment must be proportional to the copayment for a longer time period. The requirements of this section apply to the insurer and to a 3rd-party administrator or pharmaceutical benefits manager under contract with the insurer. The superintendent shall adopt rules to implement this section. The rules must include a penalty provision applicable to an insurer that fails to provide coverage as required by this section and the rules adopted pursuant to this section. The penalty provision must require an insurer that does not comply with the requirements of this section and the rules adopted pursuant to this section to pay a contribution to the Unused Pharmaceutical Disposal Program Fund established under Title 22, section 2700, subsection 5. Rules adopted under this section are routine technical rules as defined by Title 5, chapter 375, subchapter 2-A. As part of the rule-making process, notice must be given to the joint standing committee of the Legislature having jurisdiction over insurance and financial services matters and the joint standing committee of the Legislature having jurisdiction over health and human services matters.

Sec. 3. 24-A MRS §4257 is enacted to read:

§ 4257. Copayments for short-term prescriptions

A health maintenance organization that issues individual and group health care contracts that provide coverage for prescription drugs shall adjust the copayment of an insured person to accommodate a short-term prescription for 14 days or less when short-term prescribing for that person is determined to be appropriate by the licensed health care professional who writes the prescription. The copayment must be proportional to the copayment for a longer time period. The requirements of this section apply to the health maintenance organization and to a 3rd-party administrator or pharmaceutical benefits manager under contract with the insurer. The superintendent shall adopt rules to implement this section. The rules must include a penalty provision applicable to a health maintenance organization that fails to provide coverage as required by this section and the rules adopted pursuant to this section. The penalty provision must require a health maintenance organization that does not comply with the requirements of this section and the rules adopted pursuant to this section to pay a contribution to the Unused Pharmaceutical Disposal Program Fund established under Title 22, section 2700, subsection 5. Rules adopted under this section are routine technical rules as defined by Title 5, chapter 375, subchapter 2-A. As part of the rule-making process, notice must be given to the joint standing committee of the Legislature having jurisdiction over insurance and financial services matters and the joint standing committee of the Legislature having jurisdiction over health and human services matters.

Sec. 4. Application. The requirements of this Act apply to all policies, contracts and certificates executed, delivered, issued for delivery, continued or renewed in this State on or after January 1, 2010. For the purposes of this Act, all contracts are deemed to be renewed no later than the next yearly anniversary of the contract date.

SUMMARY

This bill requires an individual or group health insurer, a health maintenance organization that provides health coverage for prescription drugs and a 3rd-party administrator or pharmaceutical benefits manager to adjust the copayment to accommodate a short-term prescription. The copayment must be proportional. The bill requires the Superintendent of Insurance to adopt routine technical rules that include a penalty provision. The penalty provision must require an insurer that does not comply with the requirements and rules to pay a contribution to the Unused Pharmaceutical Disposal Program Fund established under the Maine Revised Statutes, Title 22, section 2700, subsection 5. As part of the rule-making process, notice must be given to the joint standing committee of the Legislature having jurisdiction over insurance and financial services matters and the joint standing committee of the Legislature having jurisdiction over health and human services matters. The requirements apply to policies, contracts and certificates executed, delivered, issued for delivery, continued or renewed in this State on or after January 1, 2010.